



## **PHYSICIAN AND DURABLE MEDICAL EQUIPMENT**

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### **COVERAGE CRITERIA FOR MONTHS 1 THROUGH 4 (E0619RR)**

"Apnea monitors" are defined as cardiorespiratory monitoring devices capable of providing continuous or periodic two-channel monitoring of heart rate and respiratory rate and must meet current Food and Drug Administration (FDA) guidelines for products in this class. Apnea monitors must have alarming mechanisms to alert care givers of cardiorespiratory distress or other events which require immediate intervention and must be capable of recording, storing events, and providing event recording downloads or printouts of such data. Apnea monitors may be authorized for infants who meet one of the following criteria:

- Infant has experienced an apparent life threatening event requiring CPR or vigorous stimulation.
- Symptomatic preterm infant undergoing medical management of apnea.
- Infant requiring home oxygen therapy.
- Infant who requires less than 24 hours of continuous ventilator support.
- Infant with a tracheotomy. (Technology dependent)
- Infant is a sibling of one or more sudden infant death syndrome victims.
- Infant has an anatomic abnormality which causes a compromise to airway.
- Infant has gastroesophageal reflux, neurologic, or metabolic disorder that affects respiratory control.
- Infant has a chronic lung disease which requires supplemental oxygen.

**NOTE:** An infant is described as a child whose age ranges from birth through 12 months of age.

Additional requirements for use of home monitoring include the following:

- Attestation by the attending physician that the caregivers are capable of being trained to use the monitor properly.
- Education of the caregiver regarding mechanical aspects in operation of the monitor.
- Twenty-four hour availability of monitor service staff.

Infant cardiopulmonary resuscitation (CPR) training of caregivers by certified trainers is recommended.

### **ADDITIONAL COVERAGE CRITERIA FOR MONTHS 5 THROUGH 12 (E0619RRKJ)**

In addition to meeting the above criteria, one of the following criteria must be met for months 5 through 12:

- Infant is technology dependent and supporting documentation or patient record indicates that monitor is still being used, OR
- Infant is non-technology dependent and patient record documents a clinically significant apneic or bradycardia episode has occurred in the last 2 months.

### **NON-COVERED DIAGNOSES/CONDITIONS FOR THE APNEA MONITOR**

The following diagnoses or conditions alone are not indications for monitoring, and are **not** covered.

- 1) Seizure disorders (without life threatening events);
- 2) Hydrocephalus, uncomplicated;
- 3) Mental retardation;
- 4) Irreversible terminal conditions;
- 5) Congenital heart defects, with or without associated arrhythmias;
- 6) Distant family history of apnea or SIDS (other than an immediate sibling);
- 7) History of apnea monitor use with other siblings;
- 8) History of apnea with other sibling(s);
- 9) Parental anxiety or family request for a monitor;
- 10) Monitoring of blood oxygen saturation.

### **PRE-CERTIFICATION REQUIREMENT FOR APNEA MONITOR WITH RECORDING FEATURE**

Effective for dates of service on or after September 11, 2008 the following procedure codes for apnea monitors will require pre-certification for MO HealthNet participants:

- E0619RR: Apnea monitor, with recording feature (rental months 1-4)
- E0619RRKJ: Apnea monitor, with recording feature (rental months 5-12)

### **CONVERSION OF APNEA MONITORS IN RENTAL MONTHS 1 THROUGH 4 (E0619RR)**

MO HealthNet currently requires the DME provider to have the Certificate of Medical Necessity for the apnea monitor for rental months 1 through 4 in the participant's file. Thus, the documents do not exist with MO HealthNet to convert to a pre-certification for rental months one through four. For this reason, DME providers may contact the Help Desk at

1-800-392-8030 to consider a pre-certification for any of the remaining months of the initial four month time period of the apnea monitor rental for their clients. Help Desk staff will verify the start date of the rental with the provider and MO HealthNet claim records.

### **CONVERSION OF APPROVED PRIOR AUTHORIZATION REQUESTS FOR E0619RRKJ**

Currently, coverage of apnea monitor for months 5 thru 12 months require an approved prior authorization request for reimbursement of services. Prior authorization requests that are submitted and approved prior to September 11, 2008 will be converted to a pre-certification. Please note all apnea monitors are subject to rent-to-purchase requirements regardless of the existence of an approved prior authorization/pre-certification request.

Requests must meet medical criteria established by the MO HealthNet Division (MHD) in order to be approved. These medical criteria may be referenced in the clinical edit criteria for apnea monitor, with recording feature (E0619) posted on the MHD Web site.

### **INITIATING PRE-CERTIFICATION REQUESTS FOR DME**

Pre-certification of DME is a two-step process. Requests for pre-certification must be initiated by an authorized DME prescriber who writes prescriptions for items covered under the DME Program. Authorized DME prescribers include physicians, podiatrists and nurse practitioners who have a collaborative practice agreement with a physician that allows for prescription of such items. The enrolled DME provider will access the pre-certification initiated by the prescriber to complete the second step of the pre-certification process. All requests must be approved by the MHD. Providers are encouraged to sign up for the MO HealthNet Web tool – [CyberAccessSM](#) – which automates the pre-certification process. To become a

CyberAccess<sup>SM</sup> user, contact the ACS-Heritage help desk toll free at 1-888-581-9797 or 573-632-9797 or send an e-mail to <mailto:MOHealthNetCyberaccess@heritage-info.com>.

The CyberAccess<sup>SM</sup> tool allows each pre-certification to automatically reference the individual participant's claim history, including ICD-9 diagnosis codes and CPT procedure codes. Requests for pre-certification will also be taken by the MO HealthNet call center at 800-392-8030. Requests for pre-certification must meet medical criteria established by the MHD in order to be approved. [Medical criteria](#) is published in [provider bulletins](#) and posted on the [MHD Web site](#) prior to implementation. If a pre-certification request submitted through

CyberAccess<sup>SM</sup> is denied, providers may click on the box to have a MO HealthNet call center representative contact them. The call center is available Monday through Friday, from 8:00 am to 5:00 pm, excluding state holidays.

PLEASE NOTE: An approved pre-certification request does not guarantee payment. The provider must verify participant eligibility on the date of service using the Interactive Voice Response (IVR) System at (573) 635-8908 or by logging onto the MO HealthNet Internet Web portal at [www.emomed.com](http://www.emomed.com).

**Provider Bulletins** are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin site.

**MO HealthNet News:** Providers and other interested parties are urged to go to the MHD Website at <http://dss.missouri.gov/mhd/global/pages/mednewssubscribe.htm> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via e-mail.

**MO HealthNet Managed Care:** The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the red MO HealthNet card or by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One for the red or white card.

**Provider Communications Hotline**  
**573-751-2896**